

POSITION	ID NO.	DATE
CLASSIFIER	57	05/27/97
EXAMINER	335	9/15/97
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND	#570	10-29-97
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	9/1/97
2	9/1/97
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49	9/1/97
50	9/1/97

SYMBOLS
✓ Rejected
= Allowed
- (Through member) Canceled
+ Restricted
N Non-elected
I Interference
A Appeal
O Objected

Claim	Date
Final	
Original	
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